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**BEFORE THE  
PHYSICAL THERAPY BOARD OF CALIFORNIA  
DEPARTMENT OF CONSUMER AFFAIRS  
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

Case No. 1D 2002 63249

SALLY LEE STEVENS  
44 185 Dalea Circle  
La Quinta, CA 92253

**A C C U S A T I O N**

Physical Therapist License No. PT 5633

Respondent.

Complainant alleges:

**PARTIES**

1. Steven K. Hartzell (Complainant) brings this Accusation solely in his official capacity as the Executive Officer of the Physical Therapy Board of California, Department of Consumer Affairs.

2. On or about January 14, 1971, the Physical Therapy Board of California issued Physical Therapist License Number PT 5633 to Sally Lee Stevens (Respondent). The Physical Therapist License was in full force and effect at all times relevant to the charges brought herein and will expire on September 30, 2005, unless renewed.

**JURISDICTION**

3. This Accusation is brought before the Physical Therapy Board of California (Board), Department of Consumer Affairs, under the authority of the following laws.

1 All section references are to the Business and Professions Code unless otherwise indicated.

2 4. Section 2609 of the Code states:

3 “The board shall issue, suspend, and revoke licenses and approvals to practice  
4 physical therapy as provided in this chapter.”

5 5. Section 2660 of the Code states:

6 “The board may, after the conduct of appropriate proceedings under the  
7 Administrative Procedure Act, suspend for not more than 12 months, or revoke, or  
8 impose probationary conditions upon, or issue subject to terms and conditions any  
9 license, certificate, or approval issued under this chapter for any of the following causes:

10 (a) Advertising in violation of Section 17500.

11 (b) Fraud in the procurement of any license under this chapter.

12 (c) Procuring or aiding or offering to procure or aid in criminal abortion.

13 (d) Conviction of a crime which substantially relates to the qualifications,  
14 functions, or duties of a physical therapist. The record of conviction or a certified  
15 copy thereof shall be conclusive evidence of that conviction.

16 (e) Impersonating or acting as a proxy for an applicant in any examination  
17 given under this chapter.

18 (f) Habitual intemperance.

19 (g) Addiction to the excessive use of any habit-forming drug.

20 (h) Gross negligence in his or her practice as a physical therapist.

21 (i) Conviction of a violation of any of the provisions of this chapter or of  
22 the State Medical Practice Act, or violating, or attempting to violate, directly or  
23 indirectly, or assisting in or abetting the violating of, or conspiring to violate any  
24 provision or term of this chapter or of the State Medical Practice Act.

25 (j) The aiding or abetting of any person to violate this chapter or any  
26 regulations duly adopted under this chapter.

27 (k) The aiding or abetting of any person to engage in the unlawful practice  
28 of physical therapy.

1 (l) The commission of any fraudulent, dishonest, or corrupt act which is  
2 substantially related to the qualifications, functions, or duties of a physical  
3 therapist.

4 (m) Except for good cause, the knowing failure to protect patients by  
5 failing to follow infection control guidelines of the board, thereby risking  
6 transmission of blood-borne infectious diseases from licensee to patient, from  
7 patient to patient, and from patient to licensee. In administering this subdivision,  
8 the board shall consider referencing the standards, regulations, and guidelines of  
9 the State Department of Health Services developed pursuant to Section 1250.11 of  
10 the Health and Safety Code and the standards, regulations, and guidelines  
11 pursuant to the California Occupational Safety and Health Act of 1973 (Part 1  
12 (commencing with Section 6300) of Division 5 of the Labor Code) for preventing  
13 the transmission of HIV, Hepatitis B, and other blood-borne pathogens in health  
14 care settings. As necessary, the board shall consult with the Medical Board of  
15 California, the California Board of Podiatric Medicine, the Board of Dental  
16 Examiners of California, the Board of Registered Nursing, and the Board of  
17 Vocational Nursing and Psychiatric Technicians, to encourage appropriate  
18 consistency in the implementation of this subdivision.

19 “The board shall seek to ensure that licensees are informed of the  
20 responsibility of licensees and others to follow infection control guidelines, and of the  
21 most recent scientifically recognized safeguards for minimizing the risk of transmission  
22 of blood-borne infectious diseases.”

23 6. Section 2661.5 of the Code states:

24 “(a) In any order issued in resolution of a disciplinary proceeding before  
25 the board, the board may request the administrative law judge to direct any  
26 licensee found guilty of unprofessional conduct to pay to the board a sum not to  
27 exceed the actual and reasonable costs of the investigation and prosecution of the  
28 case.

1 “(b) The costs to be assessed shall be fixed by the administrative law  
2 judge and shall not in any event be increased by the board. When the board does  
3 not adopt a proposed decision and remands the case to an administrative law  
4 judge, the administrative law judge shall not increase the amount of the assessed  
5 costs specified in the proposed decision.

6 “(c) When the payment directed in an order for payment of costs is not  
7 made by the licensee, the board may enforce the order of payment by bringing an  
8 action in any appropriate court. This right of enforcement shall be in addition to  
9 any other rights the board may have as to any licensee directed to pay costs.

10 “(d) In any judicial action for the recovery of costs, proof of the board's  
11 decision shall be conclusive proof of the validity of the order of payment and the  
12 terms for payment.

13 “(e) (1) Except as provided in paragraph (2), the board shall not renew  
14 or reinstate the license or approval of any person who has failed to pay all  
15 of the costs ordered under this section.

16 (2) Notwithstanding paragraph (1), the board may, in its  
17 discretion, conditionally renew or reinstate for a maximum of one year the  
18 license or approval of any person who demonstrates financial hardship and  
19 who enters into a formal agreement with the board to reimburse the board  
20 within that one year period for those unpaid costs.

21 “(f) All costs recovered under this section shall be deposited in the  
22 Physical Therapy Fund as a reimbursement in either the fiscal year in which the  
23 costs are actually recovered or the previous fiscal year, as the board may direct.”

24 7. Section 2630 of the Code states:

25 “It is unlawful for any person or persons to practice, or offer to practice, physical  
26 therapy in this state for compensation received or expected, or to hold himself or herself  
27 out as a physical therapist, unless at the time of so doing the person holds a valid,  
28 unexpired, and unrevoked license issued under this chapter.

1           “Nothing in this section shall restrict the activities authorized by their licenses on  
2 the part of any persons licensed under this code or any initiative act, or the activities  
3 authorized to be performed pursuant to Article 4.5 (commencing with Section 2655) or  
4 Chapter 7.7 (commencing with Section 3500).

5           “A physical therapist licensed pursuant to this chapter may utilized the services of  
6 one aide engaged in patient-related tasks to assist the physical therapist in his or her  
7 practice of physical therapy. "Patient-related task" means a physical therapy service  
8 rendered directly to the patient by an aide, excluding non-patient-related tasks. "Non-  
9 patient-related task" means a task related to observation of the patient, transport of the  
10 patient, physical support only during gait or transfer training, housekeeping duties,  
11 clerical duties, and similar functions. The aide shall at all times be under the orders,  
12 direction, and immediate supervision of the physical therapist. Nothing in this section  
13 shall authorize an aide to independently perform physical therapy or any physical therapy  
14 procedure. The board shall adopt regulations that set forth the standards and  
15 requirements for the orders, direction, and immediate supervision of an aide by a physical  
16 therapist. The physical therapist shall provide continuous and immediate supervision of  
17 the aide. The physical therapist shall be in the same facility as, and in proximity to, the  
18 location where the aide is performing patient-related tasks, and shall be readily available  
19 at all times to provide advice or instruction to the aide. When patient-related tasks are  
20 provided to a patient by an aide, the supervising physical therapist shall, at some point  
21 during the treatment day, provide direct service to the patient as treatment for the patient's  
22 condition, or to further evaluate and monitor the patient's progress, and shall  
23 correspondingly document the patient's record.

24           “The administration of massage, external baths, or normal exercise not a part of a  
25 physical therapy treatment shall not be prohibited by this section.”

26           8.       Section 2655 of the Code states:

27           “As used in this article:

28                   (a) "Physical therapist" means a physical therapist licensed by the board.

(b) "Physical therapist assistant" means a person who meets the qualifications stated in Section 2655.3 and who is approved by the board to assist in the provision of physical therapy under the supervision of a physical therapist who shall be responsible for the extent, kind, and quality of the services provided by the physical therapist assistant.

(c) "Physical therapist assistant" and "physical therapy assistant" shall be deemed identical and interchangeable."

9. Section 2620.7 of the Code states as follows:

“(a) A physical therapist shall document his or her evaluation, goals, treatment plan, and summary of treatment in the patient record.

(b) A physical therapist shall document the care actually provided to a patient in the patient record.

(c) A physical therapist shall sign the patient record legibly.

(d) Patient records shall be maintained for a period of no less than seven years following the discharge of the patient, except that the records of unemancipated minors shall be maintained at least one year after the minor has reached the age of 18 years, and not in any case less than seven years.”

10. California Code of Regulations, title 16, section 1399.85, states:

“A physical therapist shall document in the patient record the following:

(1) Examination and re-examination

(2) Evaluation, when the patient is to be reevaluated and the reevaluation

(3) Diagnosis

(4) Prognosis and intervention

(5) Treatment plan and modification of the plan of care

(6) Each treatment provided

(7) Discharge Summary

“Each entry shall be dated and signed by the treating physical therapist. Adjacent to the treating physical therapist's signature or at least on every page if there are multiple entries

on a single page shall be the printed or stamped name of the treating physical therapist.”

11. California Code of Regulations, title 16, section 1399, states:

“A physical therapy aide is an unlicensed person who assists a physical therapist and may be utilized by a physical therapist in his or her practice by performing nonpatient related tasks, or by performing patient related tasks.

“(a) As used in these regulations:

(1) A “patient related task” means a physical therapy service rendered directly to the patient by an aide, excluding nonpatient related tasks as defined below.

(2) A “nonpatient related task” means a task related to observation of the patient, transport of patients, physical support only during gait or transfer training, housekeeping duties, clerical duties and similar functions.

“(b) “Under the orders, direction and immediate supervision” means:

(1) Prior to the initiation of care, the physical therapist shall evaluate every patient prior to the performance of any patient related tasks by the aide.

The evaluation shall be documented in the patient's record.

(2) The physical therapist shall formulate and record in the patient's record a treatment program based upon the evaluation and any other information available to the physical therapist, and shall determine those patient related tasks which may be assigned to an aide. The patient's record shall reflect those patient related tasks that were rendered by the aide, including the signature of the aide who performed those tasks.

(3) The physical therapist shall assign only those patient related tasks that can be safely and effectively performed by the aide. The supervising physical therapist shall be responsible at all times for the conduct of the aide while he or she is on duty.

(4) The physical therapist shall provide continuous and immediate supervision of the aide. The physical therapist shall be in the same facility

1 as and in immediate proximity to the location where the aide is performing  
2 patient related tasks, and shall be readily available at all times to provide  
3 advice or instruction to the aide. When patient related tasks are provided a  
4 patient by an aide the supervising physical therapist shall at some point  
5 during the treatment day provide direct service to the patient as treatment  
6 for the patient's condition or to further evaluate and monitor the patient's  
7 progress, and so document in the patient's record.

8 (5) The physical therapist shall perform periodic re-evaluation of the  
9 patient as necessary and make adjustments in the patient's treatment  
10 program. The re-evaluation shall be documented in the patient's record.

11 (6) The supervising physical therapist shall countersign with their first  
12 initial and last name, and date all entries in the patient's record, on the  
13 same day as patient related tasks were provided by the aide.”

14 12. California Code of Regulations, title 16, section 1399.20, states:

15 “For the purposes of denial, suspension or revocation of a license or approval,  
16 pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall  
17 be considered to be substantially related to the qualifications, functions or duties of a  
18 person holding a license or approval under the Physical Therapy Practice Act if to a  
19 substantial degree it evidences present or potential unfitness of a person to perform the  
20 functions authorized by the license or approval in a manner consistent with the public  
21 health, safety or welfare. Such crimes or acts shall include but not be limited to the  
22 following:

23 “(a) Violating or attempting to violate, directly or indirectly, or assisting in or  
24 abetting the violation of, or conspiring to violate any provision or term of the Physical  
25 Therapy Practice Act.

26 “(b) Conviction of a crime involving fiscal dishonesty arising out of or in  
27 connection with the practice of physical therapy.

28 “(c) Violating or attempting to violate any provision or term of the Medical



Practice Act.”

**FIRST CAUSE FOR DISCIPLINE**

(Aiding and Abetting the Illegal Practice of  
Physical Therapy When Utilizing an Aide)

13. Respondent is subject to disciplinary action under section 2660, subdivisions (j) and (k), and section 2630 of the Code, in conjunction with California Code of Regulations Title 16, section 1399, in that she aided and abetted the illegal practice of physical therapy in the use of an aide. The circumstances are as follows:

A. With respect to patient N.H., the patient was treated by physical therapy aides employed by respondent on numerous occasions between August 16, 2001, and October 31, 2001, without direct service rendered by respondent or a licensed physical therapist.

B. With respect to patient N.H., the patient was treated by physical therapy aides employed by respondent on numerous occasions between August 16, 2001, and October 31, 2001, when respondent or a licensed physical therapist was not physically present on the premises.

C. With respect to patient W.M., the patient’s initial physical therapy evaluation was performed on May 20, 2003, by a physical therapy aide employed by respondent, who signed respondent’s name to the chart.

D. With respect to patient W.M., the patient was treated by physical therapy aides employed by respondent on numerous occasions between May 20, 2003, and April 15, 2004, without direct service rendered by respondent or a licensed physical therapist.

E. With respect to patient W.M., the patient was treated by physical therapy aides employed by respondent on numerous occasions between May 20, 2003, and April 15, 2004, when respondent or a licensed physical therapist was not physically present on the premises.

F. With respect to patient R.D., the patient’s initial physical therapy evaluation was performed on December 17, 2003, by a physical therapy aide employed by

1 respondent.

2 G. With respect to patient R.D., the patient was treated by physical therapy  
3 aides employed by respondent on numerous occasions between December 17, 2003, and  
4 May 4, 2004, without direct service rendered by respondent or a licensed physical  
5 therapist.

6 H. With respect to patient R.D., the patient was treated by physical therapy  
7 aides employed by respondent on numerous occasions between December 17, 2003, and  
8 May 4, 2004, when respondent or a licensed physical therapist was not physically present  
9 on the premises.

10 I. With respect to patient O.H., the patient's initial physical therapy evaluation  
11 was performed on March 15, 2004, by a physical therapy aide employed by respondent,  
12 who signed respondent's name to the chart.

13 J. With respect to patient O.H., the patient was treated by a physical therapy  
14 aide employed by respondent on March 15, 2004, without direct service rendered by  
15 respondent or a licensed physical therapist.

16 K. With respect to patient S.B., the patient's initial physical therapy evaluation  
17 was performed on March 10, 2004, by a physical therapy aide employed by respondent,  
18 who signed respondent's name to the chart.

19 L. With respect to patient S.B., the patient was treated by physical therapy aides  
20 employed by respondent on numerous occasions between March 10, 2004, and April 27,  
21 2004, without direct service rendered by respondent or a licensed physical therapist.

22 M. With respect to patient S.B., the patient was treated by physical therapy  
23 aides employed by respondent on numerous occasions between March 10, 2004, and  
24 April 27, 2004, when respondent or a licensed physical therapist was not physically  
25 present on the premises.

26 N. With respect to patient W.L., the patient's initial physical therapy evaluations  
27 were performed on September 12, 2002, and February 5, 2004, by a physical therapy aide  
28 employed by respondent, who signed respondent's name to the chart (on September 12,

1 2002, only).

2 O. With respect to patient W.L., the patient was treated by physical therapy  
3 aides employed by respondent on numerous occasions between September 12, 2002, and  
4 October 10, 2002, and February 5, 2004, and February 19, 2004, without direct service  
5 rendered by respondent or a licensed physical therapist.

6 P. With respect to patient W.L., the patient was treated by physical therapy  
7 aides employed by respondent on numerous occasions between September 12, 2002, and  
8 October 10, 2002, and February 5, 2004, and February 19, 2004, when respondent or a  
9 licensed physical therapist was not physically present on the premises.

10 **SECOND CAUSE FOR DISCIPLINE**

11 (Gross Negligence)

12 14. Respondent is subject to disciplinary action under section 2660, subsection  
13 (h) of the Code in that respondent engaged in extreme departures from the standard of care with  
14 respect to her treatment of patients. The circumstances are as follows:

15 A. With respect to patient N.H., the patient was treated by physical therapy  
16 aides employed by respondent on numerous occasions between August 16, 2001, and  
17 October 31, 2001, without a proper medical diagnosis in the chart.

18 B. With respect to patient S.B., the patient was treated by physical therapy  
19 aides employed by respondent on numerous occasions between March 10, 2004, and  
20 April 27, 2004, without a proper medical diagnosis in the chart.

21 C. With respect to patient W.L., the patient was treated by physical therapy  
22 aides employed by respondent on numerous occasions between September 12, 2002, and  
23 October 10, 2002, and February 5, 2004, and February 19, 2004, without a proper medical  
24 diagnosis in the chart.

25 D. With respect to patient O.H., the patient was treated by physical therapy  
26 aides employed by respondent on March 15, 2004, without a proper medical diagnosis in  
27 the chart.

28 E. With respect to patient R.D., a discharge summary was not documented in

1 the patient's physical therapy records.

2 F. With respect to patient O.H., a discharge summary was not documented in  
3 the patient's physical therapy records.

4 G. With respect to S.B., a discharge summary was not documented in the  
5 patient's physical therapy records.

6 H. With respect to patient N.H., who was treated by physical therapy aides  
7 employed by respondent on numerous occasions between August 16, 2001, and October  
8 31, 2001, the use of hot packs, ultrasound and electrical stimulation was not indicated for  
9 the patient's diagnosis and the overall care provided was palliative rather than  
10 progressive.

11 I. With respect to patients W.M., R.D., O.H., S.B. and W.L., who were  
12 treated by physical therapy aides employed by respondent on numerous occasions, the  
13 overall care provided was palliative and did not provide substantive progress toward  
14 functional physical therapy goals.

### 15 **THIRD CAUSE FOR DISCIPLINE**

#### 16 (Failure to Document Treatment)

17 15. Respondent is subject to disciplinary action under 2620.7, in conjunction  
18 with California Code of Regulations, Title 16, section 1399.85, in that she failed to keep proper  
19 records of physical therapy treatments that were rendered to patients. The circumstances are as  
20 follows:

21 A. With respect to patient W.M., the patient's initial physical therapy  
22 evaluation performed on May 20, 2003, was not properly documented inasmuch as it  
23 contained poor objective testing and cursory goals which were not based on objective  
24 findings.

25 B. With respect to patient R.D., the patient's initial physical therapy evaluation  
26 performed on December 17, 2003, was not properly documented inasmuch as it contained  
27 poor objective testing and cursory goals which were not based on objective findings.

28 C. With respect to patient O.H., the patient's initial physical therapy evaluation

1 performed on March 15, 2004, was not properly documented inasmuch as it contained  
2 poor objective testing and cursory goals which were not based on objective findings.

3 D. With respect to patient S.B., the patient's initial physical therapy evaluation  
4 performed on March 10, 2004, was not properly documented inasmuch as it contained  
5 poor objective testing and cursory goals which were not based on objective findings.

6 E. With respect to patient W.L., the patient's initial physical therapy evaluations  
7 performed on September 12, 2002, and February 5, 2004, were not properly documented  
8 inasmuch as they contained poor objective testing and cursory goals which were not  
9 based on objective findings.

10 F. With respect to patient R.D., a discharge summary was not documented in  
11 the patient's physical therapy records.

12 G. With respect to patient O.H., a discharge summary was not documented in  
13 the patient's physical therapy records.

14 H. With respect to S.B., a discharge summary was not documented in the  
15 patient's physical therapy records.

16 I. With respect to patient W.M., who was treated by physical therapy aides  
17 employed by respondent on numerous occasions between May 20, 2003, and April 15,  
18 2004, the daily progress notes were not properly documented inasmuch as they contained  
19 excessive subjective information and lacked objective evidence of patient progress.

20 J. With respect to patient R.D., who was treated by physical therapy aides  
21 employed by respondent on numerous occasions between December 17, 2003, and May 4,  
22 2004, the daily progress notes were not properly documented inasmuch as they contained  
23 excessive subjective information and lacked objective evidence of patient progress.

24 K. With respect to patient O.H., who was treated by a physical therapy aide  
25 employed by respondent on March 15, 2004, the daily progress notes were not properly  
26 documented inasmuch as they contained excessive subjective information and lacked  
27 objective evidence of patient progress.

28 L. With respect to patient S.B., who was treated by physical therapy aides

1 employed by respondent on numerous occasions between March 10, 2004, and April 27,  
2 2004, the daily progress notes were not properly documented inasmuch as they contained  
3 excessive subjective information and lacked objective evidence of patient progress.

4 M. With respect to patient W.L., who was treated by physical therapy aides  
5 employed by respondent on numerous occasions between September 12, 2002, and  
6 October 10, 2002, and February 5, 2004, and February 19, 2004, the daily progress notes  
7 were not properly documented inasmuch as they contained excessive subjective  
8 information and lacked objective evidence of patient progress.

9 **FOURTH CAUSE FOR DISCIPLINE**

10 (Unprofessional Conduct/Presenting False Statements)

11 16. Respondent is subject to disciplinary action under section 810 in that  
12 Respondent knowingly prepared, made or subscribed to patient physical therapy treatment  
13 records with the intent to present or use them, or to allow them to be presented or used, in  
14 support of false or fraudulent claims for compensation. The circumstances are as follows:

15 A. With respect to patient W.M., the patient was treated by physical therapy  
16 aides employed by respondent on numerous occasions between May 20, 2003, and April  
17 15, 2004, without direct service rendered by respondent or a licensed physical therapist  
18 and/or when respondent or a licensed physical therapist was not physically present on the  
19 premises. In connection with this patient, respondent knowingly prepared, made or  
20 subscribed to patient treatment records for physical therapy that was not provided by a  
21 licensed physical therapist, and allowed said false records to be used in support of false or  
22 fraudulent claims for compensation for therapy as if performed by a licensed physical  
23 therapist.

24 B. With respect to patient R.D., the patient was treated by physical therapy  
25 aides employed by respondent on numerous occasions between December 17, 2003, and  
26 May 4, 2004, without direct service rendered by respondent or a licensed physical  
27 therapist and/or when respondent or a licensed physical therapist was not physically  
28 present on the premises. With regard to this patient, respondent knowingly prepared,

1 made or subscribed to patient treatment records for physical therapy that was not  
2 provided by a licensed physical therapist, and allowed said false records to be used in  
3 support of false or fraudulent claims for compensation for therapy as if performed by a  
4 licensed physical therapist.

5 **FIFTH CAUSE FOR DISCIPLINE**

6 (Utilizing More than One Physical Therapy Aide)

7 17. Respondent is subject to disciplinary action under section 2630 and 2660,  
8 subdivision (i), of the Code in that respondent utilized more than one physical therapy aide  
9 engaged in patient related tasks to assist respondent in her practice of physical therapy. The  
10 circumstances are as follows:

11 A. Between in or around November 2002 and April 2004, respondent utilized  
12 more than one physical therapy aide engaged in patient related tasks to assist respondent  
13 in her practice of physical therapy.

14 **FIFTH CAUSE FOR DISCIPLINE**

15 (Fraudulent, Dishonest or Corrupt Acts)

16 18. Respondent is subject to disciplinary action under section 2660,  
17 subsections (i), (j) and (l), in that Respondent committed fraudulent, dishonest or corrupt acts  
18 which were substantially related to the qualifications, functions or duties of a physical therapist.  
19 The circumstances are as follows:

20 A. The facts and circumstances alleged in paragraphs 13 through 17 above are  
21 incorporated here as if fully set forth.

22 **PRAYER**

23 WHEREFORE, Complainant requests that a hearing be held on the matters herein  
24 alleged, and that following the hearing, the Physical Therapy Board of California issue a  
25 decision:

26 1. Revoking or suspending Physical Therapist License Number PT 5633,  
27 issued to Sally Lee Stevens;

28 2. Ordering Sally Lee Stevens to pay the Physical Therapy Board of

1 California the reasonable costs of the investigation and enforcement of this case, pursuant to  
2 Business and Professions Code section 2661.3;

3 3. Taking such other and further action as deemed necessary and proper.

4 DATED: May 30, 2005

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Stevens Accusation.wpd

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Original Signed By:  
STEVEN K. HARTZELL  
Executive Officer  
Physical Therapy Board of California  
Department of Consumer Affairs  
State of California  
Complainant